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**David R.J. Stiennon**

(Depositor's name)

*David R.J. Stiennon*

(Signature)

**August 10, 2004**

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/069,203	07/10/2002	Pekka Koivukunnas	FORSAL-35	1584

TITLE OF INVENTION: METHOD AND ARRANGEMENT FOR SURFACE TREATMENT OF A PAPER AND/OR BOARD WEB

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	09/08/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHIN, PETER	1731	162-206000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Stiennon & Stiennon**

2 \_\_\_\_\_

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**Metso Paper, Inc.****Helsinki, Finland**Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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(Date)

*David R.J. Stiennon* **8/10/04**

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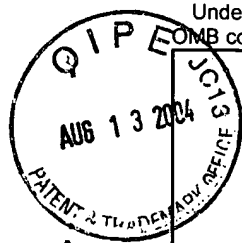
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# TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (To be used for all correspondence after initial filing)		Application Number	10/069,203
		Filing Date	July 10, 2002
		First Named Inventor	Pekka Koivukunnas
		Group Art Unit	1731
		Examiner Name	Peter Chin
Total Number of Pages in This Submission		Attorney Docket Number	FORSAL-35
<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Assignment Papers (For an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) And Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	
<input type="checkbox"/> After Allowance Communication To Group <input type="checkbox"/> Appeal Communication to Board Of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (Please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">           • PTOL-85 Part B -Fee Transmittal         </div>		Remarks	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name		David R. J. Stiennon, Reg. No. 33212	
Signature		David R. J. Stiennon	
Date		August 10, 2004	
CERTIFICATE OF MAILING			
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Typed or printed name		David R. J. Stiennon, Reg. No. 33212	
Signature		Date	August 10, 2004